

ISSUE SLIP STAPLE AREA (for additional cross references)

DESCRIPTION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Sullivan M		5-8-01
O.I.P.E. CLASSIFIER		59	
FORMALITY REVIEW	✓	1008	09/02/01
RESPONSE FORMALITY REVIEW	h	712	10-18-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	12
2	10
3	13
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
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41	✓
42	✓
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45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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7/02/01
86/12-1